

THE COMMONWEALTH OF MASSACHUSETTS

ABATEMENT
CERTIFICATE NO. _____

20

NAME OF CITY OR TOWN _____

DO NOT WRITE IN THIS SPACE

Received _____

APPLICATION FOR ABATEMENT OF MOTOR VEHICLE AND TRAILER EXCISE

To be filed on or before December 31 of the year next succeeding the year to which the excise relates or if the bill is first sent after December 1, of such succeeding year the form must be filed within 30 days of the mailing of the bill. Abatement may be granted if motor vehicle is sold and registration cancelled or if vehicle is traded for another vehicle; if registrant and motor vehicle are transferred to another state or country with proof of registration in other state or country and proof of cancellation of Massachusetts registration; if motor vehicle is overvalued; if there is subsequent registration of same vehicle in same year by same person; or if vehicle is stolen and notification of theft within 48 hours is given to police, certificate of registration surrendered not less than 30 days after the theft and certificate from Registry verifying same.

No abatement may reduce the excise collected to less than \$5.00.

To The Board of Assessors:

NAME OF PERSON ASSESSED _____ Tel. No. _____

ADDRESS _____
RESIDENTIAL, IF AN INDIVIDUAL; PRINCIPAL PLACE OF BUSINESS, IF A CORPORATION, PARTNERSHIP OR VOLUNTARY ASSOCIATION

The above named person assessed hereby makes application, under General Laws, Chapter 60A Section 2, for an abatement of a 20 _____ MOTOR VEHICLE AND TRAILER EXCISE for the reasons hereinafter set forth.

STATEMENT OF FACTS

Registration Number _____ Date of Registration _____

YOUR BILL NO. _____
DATE OF ISSUE _____
MO. _____ DAY _____ YR. _____

Year _____ Model _____ Mfgr. _____ Type _____
AS DESIGNATED BY MANUFACTURER

Number of cylinders or rated capacity _____ Vehicle Identification No. _____

Date of any sale or transfer of Motor Vehicle or Trailer _____

Name and address
of purchaser _____

If another Vehicle has been Registered on the same Registration Number — Give

Date _____ Place Garaged _____ Make _____

If no second vehicle is registered, attach copy of plate return receipt.

If vehicle reregistered in another state, attach copy of out of state registration and plate return receipt.

Reasons for application: _____

CONTENTIONS OF LAW RAISED

SUBSCRIBED THIS _____ day of _____, 20 _____, UNDER THE PENALTIES OF PERJURY

SIGNATURE OF PERSON ASSESSED _____
NAME IN FULL

THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR EXCISE. IT SHOULD BE PAID AS ASSESSED. REFUND WILL FOLLOW IF ABATEMENT IS ALLOWED.

Do not write below this line.

Notice sent _____ for hearing _____ Hearing held _____ with _____
DATE DATE DATE NAME

Original Excise: \$ _____ Valuation \$ _____ Ward _____ Page _____ Line _____ Unit _____

Abatement Allowed: \$ _____ months assessed _____ Reason _____

Adjusted Excise: \$ _____

Date _____, 20 _____ } Board of Assessors
of _____

APPLICANT:—PLEASE PRINT

20

YEAR OF EXCISE TAX

LAST NAME FIRST NAME INITIAL

ADDRESS

NAME OF CITY OR TOWN

DO NOT WRITE BELOW THIS LINE

THE COMMONWEALTH OF MASSACHUSETTS
APPLICATION FOR ABATEMENT OF
MOTOR VEHICLE AND
TRAILER EXCISE